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## BIB DATA SHEET

CONFIRMATION NO. 8460

| SERIAL NUMBER  | FILING or 371(c)<br>DATE  | CLASS                           | GROUP ART UNIT   | ATTORNEY DOCKET<br>NO. |
|--|---|---------------------------------|--|------------------------|
| 10/593,290   | 09/18/2006<br>RULE  | 426                             | 1794   | 4395-14                |
| <b>APPLICANTS</b><br>Vidar Erlingsson, Gardabaer, ICELAND;<br>Hrafnkell Eiriksson, Kopavogur, ICELAND;<br>Kristinn Andersen, Hafnarfjörður, ICELAND; |   |                                 |  |                        |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/IS05/00007 03/10/2005  |   |                                 |  |                        |
| <b>** FOREIGN APPLICATIONS *****</b><br>ICELAND 7191 03/19/2004  |   |                                 |  |                        |
| <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>04/24/2007   |   |                                 |  |                        |
| Foreign Priority claimed<br>35 USC 119(a-d) conditions met   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Met after Allowance | STATE OR<br>COUNTRY             | SHEETS<br>DRAWINGS   | TOTAL<br>CLAIMS        |
| Verified and<br>Acknowledged   | /DREW E BECKER/<br>Examiner's Signature<br>Initials   | ICELAND                         | 2  | 34                     |
| <b>ADDRESS</b><br>NIXON & VANDERHYE, PC<br>901 NORTH GLEBE ROAD, 11TH FLOOR<br>ARLINGTON, VA 22203<br>UNITED STATES                                  |   |                                 |  |                        |
| <b>TITLE</b><br>Apparatus for inspecting food items  |   |                                 |  |                        |
| <b>FILING FEE<br/>RECEIVED</b><br>1730   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following:   |                                 | <input type="checkbox"/> All Fees                            |                        |
|  |   |                                 | <input type="checkbox"/> 1.16 Fees (Filing)                  |                        |
|  |   |                                 | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |                        |
|  |   |                                 | <input type="checkbox"/> 1.18 Fees (Issue)                   |                        |
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